

**Testimony to the House Appropriations Subcommittee on Labor, Health and Human Services, and Education**

by

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The National Alliance to End Homelessness (the Alliance) is a nonpartisan, nonprofit organization committed to preventing and ending homelessness in the United States. With its network of over 10,000 faith-based, nonprofit, and public sector partners, the Alliance is a leading voice on solutions to homelessness and has supported over 250 state and local entities to develop plans to end homelessness. Communities are implementing those plans using proven interventions that couple housing with an appropriate level of supportive services to help people remain permanently housed. With federal and local leadership, the Alliance is committed to ending homelessness once and for all in the United States.

**Summary of Appropriations Goals**

**1. Continue Progress toward Ending Homelessness**

Communities across the country are targeting federal, state, and local funds to solution-focused interventions, which helped lead to significant reductions prior to the recession in homelessness among individuals with a disability. In order to continue making progress in the face of today's recession, the Alliance recommends the following:

- Allocate \$120 million to SAMHSA for services for people experiencing homelessness, including \$15.8 million for the Administration's proposed new Homeless Initiative Program.
- Provide \$75 million for the Projects for Assistance in Transition from Homelessness (PATH) program.
- Increase funding for the Runaway and Homeless Youth Act Programs to \$165 million.
- Provide \$3.28 billion for the Community Health Center program, of which \$278 million would go to the Health Care for the Homeless program.
- Fund Education for Homeless Children and Youth services at \$140 million.
- Increase funding for the Homeless Veterans Reintegration Program to \$50 million.
- Provide initial funding of \$20 million for the new Community Health Teams Grant Program, Section 3502 of the Patient Protection and Affordable Care Act.

**2. Prevent and End Homelessness by Connecting People to Mainstream Services**

The Alliance recommends the following:

- Support the Administration's request to fund the Community Services Block Grant (CSBG) program at \$700 million.
- Appropriate \$60 million in education and training vouchers for youth exiting foster care under the Safe and Stable Families Program.
- Fund the Community Mental Health Block Grant at \$521 million.
- Provide \$2.008 billion for the Substance Abuse Prevention and Treatment Block Grant.

## **Background**

An estimated 671,859 people are homeless on any given night in the United States—248,511 persons in families and 423,348 individuals. Eighteen percent of this group is chronically homeless - they have a disability and have been homeless repeatedly or continuously for 12 months. From 2005 to 2007, local planning efforts, targeted resources, and increases in supportive housing helped account for a 28 percent decline in the number of chronically homeless adults and an 18 percent decline in homelessness among people in families. Due to the recession, however, recent data indicates spikes in homelessness, particularly among families.

To help stave off drastic increases in homelessness, Congress must invest in what we know works. For chronically homeless populations, permanent supportive housing successfully and cost-effectively ends homelessness by coupling housing with intensive supportive services, such as health care, mental health services, addiction treatment, employment training, and case management. Other housing models that combine housing with an appropriate level of services based on client's needs are proving effective for families, individuals, and youth who are experiencing or at risk of homelessness.

We applaud the Federal Government for its leadership in the movement to prevent and end homelessness, and urge Congress to **adequately fund programs that help communities connect people to needed social services and permanent housing. Together, with support at all levels of government, we can finish the job of ending homelessness once and for all.**

## **Detailed Program Descriptions**

### **Goal 1: Continue Progress toward Ending Homelessness**

#### **Support Services for Permanent Supportive Housing Projects**

*The Alliance recommends allocating \$120 million for services in permanent supportive housing within SAMHSA's Center for Mental Health Services and Center for Substance Abuse Treatment.* This should include \$15.8 million for the new Homeless Initiative Program proposed by the Administration, which partners SAMHSA funding, HUD vouchers, and Medicaid to provide the coordinated resources communities need to house people. Years of reliable data and research demonstrate that the most successful solution for chronic homelessness is linking housing to the services people need to maintain their housing. Current SAMHSA investments in homeless programs are highly effective and cost-efficient.

#### **Projects for Assistance in Transition from Homelessness (PATH)**

*The Alliance recommends that Congress increase PATH funding to \$75 million.* PATH programs provide outreach to connect people who are homeless to housing and mainstream services, such as Supplemental Security Income (SSI), Medicaid, and welfare programs. In addition, they provide supportive services such as, rehabilitation, mental health services, substance abuse treatment, case management, residential supervision, which help people move toward self-sufficiency.

### **Runaway and Homeless Youth Act (RHYA) Programs**

*The Alliance recommends funding RHYA programs at \$165 million.* RHYA programs end episodes of homelessness by helping young people reunify with family or find alternative living arrangements, engaging youth living on the street with Street Outreach Programs, providing emergency shelter and family crisis counseling through the Basic Centers program, or providing supportive housing through Transitional Living Programs. Recently, the Congressional Research Service issued a report complimenting RHYA programs but detailing the gaps in services due to limited funding—only one-tenth of the youth who connect with a RHYA program are able to receive services.

### **Community Health Centers and Health Care for the Homeless (HCH) Programs**

*The Alliance recommends \$3.2 billion in the Community Health Center program within Health Resource Services Administration, which would result in \$278 million for the HCH program.* People living on the street suffer from health problems resulting from or exacerbated by being homeless, such as hypothermia, frostbite, infections of the respiratory and gastrointestinal systems, tuberculosis, and hypertension. HCH programs prevent these conditions from being fatal and provide services that are linked to affordable housing to help people remain housed and move toward self-sufficiency.

### **Education for Homeless Children and Youth (EHCY)**

*The Alliance recommends funding EHCY at \$140 million.* The mission of the EHCY program is to ensure that children can continue to attend school while they are homeless. In addition EHCY, within the Department of Education's Office of Elementary and Secondary Education, prevents and ends episodes of homelessness by establishing school liaisons who connect household to homelessness services and prevention assistance in the community. Current funding levels leave more than 300,000 identified homeless children and youth without direct services in 2007-2008.

### **Homeless Veterans Reintegration Program (HVRP)**

*The Alliance recommends that Congress increase HVRP funding to \$50 million.* Not having a stable income is one of the biggest barriers to permanent housing. HVRP, within the Department of Labor's Veterans Employment and Training Service (VETS), provides competitive grants to community-based, faith-based, and public organizations to offer employment services, job placement, and supportive services to homeless veterans. It is estimated that this program only reaches about two percent of the overall homeless veteran population. An appropriation at the authorized level of \$50 million would enable HVRP grantees to reach approximately 19,866 homeless veterans.

### **Community Health Teams Grant Program (CHT)**

*The Alliance recommends that Congress provide \$20 million for an initial round of CHT grants.* This new program, created by Section 3502 of the Patient Protection and Affordable Care Act, will provide grant funds to states and tribes to fund Community Health Teams. These teams of primary care providers and other state- and community-based resources will support people living in patient-centered medical homes, an ideal model for homeless people with severe disabilities living in permanent supportive housing.

## **Goal 2: Prevent and End Homelessness by Connecting People to Mainstream Services**

### **Community Services Block Grant (CSBG)**

*The Alliance recommends supporting the Administration's request of \$700 million for CSBG in FY 2011.* CSBG funds are used to connect low-income people to services which help them move into or maintain permanent housing. Community Action Agencies (CAAs), which are the primary local recipients of CSBG funding, are directly involved in local efforts to end homelessness, and this funding will improve their capacity and level of coverage.

### **Foster Youth Education and Training Vouchers**

*The Alliance recommends that Congress appropriate \$60 million in education and training vouchers for youth exiting foster care under the Safe and Stable Families Program.* Research of youth in transition from foster care has shown that over a quarter will experience homelessness within their first few years of adulthood. The Education and Training Voucher Program protects these youth by connecting them with housing, education, and vocational opportunities to stabilize youth, prevent economic crisis, and prevent future homelessness. Students may receive up to \$5000 a year for college or vocational training education, and these funds may be used for tuition, books, housing, or other qualified living expenses.

### **Community Mental Health Block Grant**

*The Alliance recommends that Congress appropriate \$521 million for the Community Mental Health Performance Partnership Block Grant.* Approximately half of people experiencing homelessness suffer from mental health issues. Additional mental health funds will give states the resources they need to improve their mental health system and better serve people who are homeless and living with a mental illness. The Mental Health Block Grant provides flexible funding to states for mental health services, including services linked to permanent supportive housing for homeless people.

### **Substance Abuse Prevention and Treatment (SAPT) Block Grant**

*The Alliance recommends that Congress appropriate \$2.008 billion for the SAPT Block Grant.* Studies have shown that half of all people experiencing homelessness have a diagnosable substance use disorder. States need more resources to implement proven treatment strategies coupled with affordable housing to help some homeless populations, especially chronically homeless populations, stably housed. The SAPT Block Grant is the primary source of federal funding for substance abuse treatment and prevention for many low-income individuals, including those experiencing homelessness.

### **Conclusion**

Homelessness is not inevitable. As communities implement plans to end homelessness, they are struggling to find funding for the services that homeless and formerly homeless clients need to maintain housing. The federal investments in mental health services, substance abuse treatment, employment training, youth housing, veterans' services, and case management discussed above will help communities create permanent housing solutions and change social systems to end homelessness in America.